

HAWAII STATE ETHICS COMMISSION 1001 BISHOP STREET, ASB TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809

TEL: 587-0460 FAX: 587-0470 email: ethics@hawaiiethics.org

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STATE OF HAWAII STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)							
PART I LOBBYIST							
NAME(Last)	(First)	(Middle)	TELEPHONE				
Pavliceu	Melissa	T.	808 127-7007				
MAILING ADDRESS (Street)			FAX				
841 Bishop	St., 1628		941-8968				
(City)	(State)	(Zip (Code)				
Honolulu,	HI	96817					
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE				
MAILING ADDRESS (Street)		:	FAX				
(City) (State) (Zip		Code)					

PART II ORGANIZATION	
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)	TELEPHONE
Bishop Museum	848-4161
MAILING ADDRESS (Street)	FAX
1525 Bernice St.	841-8968
(City) (State) (Zip 0	Code)
Honolulu, HI 96817	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT	TELEPHONE
Michael Chinaka	
MAILING ADDRESS (Street)	FAX
1525 Bernice St.	
	Code)
Honolulu HI 96817	

PART	PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY							
	Agriculture (X)	Education	Human Services	(X)	Science, Technology & Economic Development			
	Communications & Public Utilities	Government Operations & Finance	Intergovernmental Relations, International Affairs		Tourism & Recreation			
1	Consumer Protection & Commerce	Hawaiian Affairs	Labor & Employment		Transportation			
(X)	Culture, Arts, Historic Preservation	Health	Planning, Land & Water Use Management		Other: (indicate below)			
(x)	Ecology, Energy Environmental Protection	Housing	Public Safety & Corrections					
PART	The state of the s							
11	hereby certify that the informa		to the best of my knowledge,					
	Thelin	Travious	<u> </u>	DD-6	55			
	(Signat	ure of Lobbyist)		Date)				
PART	V AUTHORIZATION TO L	.OBBY						
NAME			TITLE OF AUTHORIZING OFFICER					
M	Michael Chinaka Chief Financial Officer							
NAME	OF ORGANIZATION (if applicable)		TE	LEPHON	E			
B	ishop Museu	.m		848	- 4161			
MAILIN	G ADDRESS (Street)		FA	X				
14	525 Bernice	St.		84	1-8968			
((City)	(State)	(Zip Code	;)				
* *	vnolulu HI	96817						
//	hereby authorize the above -	named person to engag	e in lobbying activities on beh	alf of th	e undersigned.			
	Mine V	. chn_	912	2/05	-			

(Signature of Authorizing Officer or Person Represented)

(Date)